

Application Data Sheet

Application Information

Application number::
Filing Date:: 01/22/04
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R???:
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)??:
Number of copies of CRF::
Title:: H. pylori Fucosyltransferases
Attorney Docket Number:: 019957-019400US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 18
Total Drawing Sheets:: 27
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Joanne
Middle Name::
Family Name:: Simala-Grant
Name Suffix::
City of Residence:: Edmonton, AB
State or Province of Residence::
Country of Residence:: Canada
Street of Mailing Address:: 10115 87 Avenue
City of Mailing Address:: Edmonton, AB
State or Province of mailing address::
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: T6E 2P3

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Diane
Middle Name::
Family Name:: Taylor
Name Suffix::
City of Residence:: Edmonton, AB
State or Province of Residence::
Country of Residence:: Canada
Street of Mailing Address:: 3911 118 Street
City of Mailing Address:: Edmonton, AB
State or Province of mailing address::

Country of mailing address:: Canada
Postal or Zip Code of mailing address:: T6J 1X2

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Karl
Middle Name:: F.
Family Name:: Johnson
Name Suffix::
City of Residence:: Hatboro
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 5320 Ivystream Road
City of Mailing Address:: Hatboro
State or Province of mailing address:: PA
Country of mailing address::
Postal or Zip Code of mailing address:: 19040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Daniel
Middle Name:: James
Family Name:: Bezila
Name Suffix::
City of Residence:: Philadelphia
State or Province of Residence:: PA
Country of Residence:: US
Street of Mailing Address:: 715 Red Lion Road, 2nd Floor
City of Mailing Address:: Philadelphia

State or Province of mailing address:: PA
Country of mailing address::
Postal or Zip Code of mailing address:: 19115

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::